DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare the My residence, post office address and cities only one name is listed below) or an office address and cities claimed and for which a patent is some patient. BODY TEMPERATURE is attached hereto orXX was filed applicable).	itizenship are as stated belo original, first and joint inve ought on the invention ent E BY IN SITU BLOOD 7	ntor (if p itled: M EMPER	lural inventors are named liETHOD AND APPARA RATURE MODIFICATION	below) of the s ATUS FOR C ON the specifi	ubject matter which ONTROLLING A cation of which
I have reviewed and understand the conreferred to above. I acknowledge the dwith Title 37, Code of Federal Regulations (s) for patent or inventor's certificate having the prior Foreign Application (s)	uty to disclose information ions, Section 1.56. I claim atent or inventor's certifica	which is foreign te listed	material to the examination priority benefits under Title below and have also identi	on of this appli le 35, United S ified below any	cation in accordance States Code, Section
Country	Application No.	Da	te of Filing	Priority Cl Under 35	
NA				Yes	No
				Yes	No
I claim the benefit under Title 35, Unit subject matter of each of the claims of the first paragraph of Title 35, United Title 37, Code of Federal Regulations, PCT international filing date of this apparents of the subject of the s	this application is not discl States Code, Section 112, Section 1.56 which occurr	osed in t I acknow	he prior United States app rledge the duty to disclose	lication in the material infor	manner provided by mation as defined in
08/324,853	October 18, 1994		x Patented	Pending	Abandoned
08/015,774	February 10, 1993		Patented	Pending <u>x</u>	Abandoned
POWER OF ATTORNEY: As a name and transact all business in the Patent a	ed inventor, I hereby appoin	Reg. No. 29, Reg. No. 29, Reg. No. 29, Reg. No. 29, No. 29, No. 30, No	owing attorney(s) and/or a crewith. 29,541 038 5. 27,431 . 31,836 28,572 5. 30,223 8,464 36,443		
Send Correspondence to: JAMES M. HESLIN TOWNSEND and TOWNSEND and CREW			Direct Telephone Calls to: (Name, Reg. No., Telephone No.)		

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Residence & Citizenship	City	State/Foreign Country	Country of Citizenship	
Post Office Address	Post Office Address	City	State/Country Zip Code	

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3		
ROBERT GINSBURG				
Date 9/12/56	Date	Date		